



Office of the City Engineer
609 West Navajo Street
West Lafayette, Indiana 47906
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MEMORANDUM

TO: Board of Public Works and Safety

FROM: Elizabeth L. Cook, P.E.
ADA Coordination Committee Chairperson

DATE: December 13, 2010

CC: ADA Coordination Committee

SUBJECT: ADA DOCUMENTS

The City of West Lafayette has formed an American with Disabilities Act (ADA) Coordination Committee comprised of one person from each city department since the city's compliance with the ADA affects all aspects of city work.

Over the last couple of months, the Committee has met regularly to review the City's existing ADA compliance and the recently updated ADA Tool Kit for state and local governments put out by the Civil Rights Division of the U.S. Department of Justice. As part of updating our policies and procedures, the Committee developed the attached Grievance Procedure and Notice under the Americans with Disabilities Act. The Committee is requesting that the board review the documents over the next week and then approve them at the December 20th meeting.

The ADA Coordination Committee is another step in the city's ongoing effort to be proactive in making West Lafayette a more accessible community. The Committee will continue to meet on a regular basis and will be the key point of contact for addressing accessibility.



NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT

In accordance with the requirements of title II of the Americans with Disabilities Act of 1990 ("ADA"), the City of West Lafayette will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

Employment: The City of West Lafayette does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under title I of the ADA.

Effective Communication: The City of West Lafayette will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in the City of West Lafayette's programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

Modifications to Policies and Procedures: The City of West Lafayette will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcomed in the City of West Lafayette's offices, even where pets are generally prohibited.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of the City of West Lafayette, should contact the ADA Coordination Committee in the Office of the Mayor (775-5100) as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require the City of West Lafayette to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Complaints that a program, service, or activity of the City of West Lafayette is not accessible to persons with disabilities should be directed to the ADA Coordination Committee (775-5100).

The City of West Lafayette will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are not accessible to persons who use wheelchairs.

CITY OF WEST LAFAYETTE GRIEVANCE PROCEDURE UNDER THE AMERICANS WITH DISABILITIES ACT

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the City of West Lafayette. The City's Personnel Policy governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

ADA Coordination Committee
Office of the Mayor
609 West Navajo Street
West Lafayette, Indiana 47906

Within 15 calendar days after receipt of the complaint, the ADA Coordination Committee Chairperson and two other ADA Coordination Committee members will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, the ADA Coordination Committee Chairperson or her designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the City of West Lafayette and offer options for substantive resolution of the complaint.

If the response by the ADA Coordination Committee Chairperson or her designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the entire ADA Coordination Committee.

Within 15 calendar days after receipt of the complaint, the ADA Coordination Committee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, the ADA Coordination Committee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the ADA Coordination Committee and offer options for substantive resolution of the complaint if different from those indicated by the subcommittee in the first step.

If the response by the ADA Coordination Committee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the Board of Public Works and Safety or their designee.

Within 15 calendar days after receipt of the appeal, the Board of Public Works and Safety or their designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the Board of Public Works and Safety or their designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by the ADA Coordination Committee Chairperson or her designee, appeals to the ADA Coordination Committee, appeals to the Board of Public Works and Safety or their designee, and responses from these three groups will be retained by the City of West Lafayette for at least three years.

**City of West Lafayette
Complaint Form
Americans with Disabilities Act (ADA)**

Section 1:

Please fill in completely and legibly. If the information is incomplete or it cannot be read, the complaint will not be investigated.

Last Name	Middle Initial	First Name
Street Address	City	State Zip Code
Telephone Number (including area code)	Best time to call this number	
Alternate Telephone Number (including area code)	Best time to call this number	
Email Address		

Section 2:

Please provide a complete description of the specific issue(s) you believe are inconsistent with Title II of the Americans with Disabilities Act (use additional pages as necessary and provide documentation supporting the allegation).

Section 3:

Please provide the specific location(s) of the ADA issues prompting this complaint.

Section 4:

Please provide the date when the ADA non-compliance occurred/was noted.

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Section 5:

Please state as specifically as possible what you think should be done to resolve the complaint.

Please sign and date this form.

Signature

Date

Mail completed complaint form to:

Office of the Mayor
City of West Lafayette
609 West Navajo Street
West Lafayette, Indiana 47906
ATTN: ADA Coordination Committee

For Office Use Only:

Date received

Date investigated

Results (with supporting documentation or photographs):

Date Complainant contacted

Method of Contact

☐ Phone

☐ Letter

☐ Email

Complaint Resolved?

☐ Yes

☐ No